

## TEXAS BOARD OF PROFESSIONAL LAND SURVEYING

12100 Park 35 Circle, Building A, Suite 156 MC-230 Austin TX 78753 www.txls.state.tx.us

Phone: (512) 239-5263 Fax: (512) 239-5253

Office Use Only
Transaction #
Entity #
Receipt #
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## APPLICATION TO RETAIN SURVEYOR-IN-TRAINING CERTIFICATE

**Instructions for Filing Application** 

- A. Read all Board Rules before completing the application. Note that Board Rule 661.51 has specific information regarding retaining the SIT Certificate.
- B. All information requested on this form must be clearly typewritten or lettered in black ink. All questions must be answered. Failure to complete any portion of the application form will result in the application being returned to the applicant.
- C. The application should be prepared in duplicate. The original must be returned to the office of the Board, and the applicant should retain the duplicate.
- D. An application fee of twenty-five dollars and 94 cents (\$25.94) must accompany the application, which is non-refundable.
- E. Payment must be by money order, cashier's check or certified check, made payable to the "Texas Board of Professional Land Surveying". Cash and personal checks will not be accepted.

## 1. General Information

Name in Full Date_				<del></del>
Social Security No	Driver's Lic	ense No		
Address (Indicate preferred mai	Attach unmounted,			
Residence Street				recent, passport type photograph in this
City				space. Trim photograph to fill the
E-mail address				1
Business Firm Name				Use ballpoint pen to
Firm Number				sign and date photograph.
Street or P. O. Box				
City	State	Zip		
Telephone Numbers (include are	ea code)			
Residence ( )	Business	s ()		
Date of Birth	Place of Birth _			
Resident of Texas O Yes O	No If No, where?			
Are you a US Citizen Yes	No. If No. give INS Stat	110	Card l	No

## 2. Registration Other Than Under This Act

	s a Surveyor in Other States? Yes No If Yes, complete the informat Hours of Exam Registration No Date Registered Ex	
State By exam	Hours of Exam Registration No Date Registered Ex	piration
Are you Registered/L	icensed in any other profession? Yes No If Yes, complete the information State Registration No Date Registered Expire	mation below:
Has any Registration/	License been revoked or received disciplinary action? Yes No	
	rou may attach additional sheets)	
was completed since follows: Successful completion surveying; participate knowledge related to	equires written proof of completion of at least 32 hours of acceptable continuing first becoming a SIT. Acceptable continuing education for the 8 year period on of courses in areas supporting development of skill and competence in in programs, seminars, workshops or conferences which provide ince the practice of professional land surveying and other continuing education a Board. Board approved continuing education courses can be found on the	d will be defined as n professional land reased professional ctivities which
<b>Date Completed</b>	Name of Course or Description of Activity	Hours
	(Indicate which courses are Board Approved)	
	Total Hours (must be at least 32)	
	6. Certification	
I hereby certify under my knowledge, infor	er penalty of perjury that the information contained herein is true and corremation and belief.	rect to the best of
	Signature Date	<u> </u>
	Printed Name	